



Arizona State Board of Nursing

4747 N. 7th Street, Suite 200
Phoenix, AZ 85014-3653
Phone (602) 889-5150 Fax (602) 889-5155
E-Mail: arizona@azbn.gov
Home Page: <http://www.azbn.gov>

Declaration of Primary State of Residence

A review of your application indicates that you have another compact state listed as your primary state of residence. Arizona is a compact state and you may not hold a license in two compact states at the same time.

In order for Arizona to issue you a permanent license you will need to declare Arizona as your primary state of residency. If this is your intent, please complete the bottom portion of this page and return to Arizona State Board of Nursing to indicate that you are moving to Arizona and declaring Arizona as your primary state of residency. (The primary state of residency is where you vote, pay taxes, hold a driver's license, etc.)

No temporary or permanent license will be mailed to you until we receive your written verification.

Check one of the following and sign; return the original to Arizona State Board of Nursing in the envelope provided for you.

- ☐ I do not declare Arizona as my primary state of residency. Please put my license on Inactive Status.
- ☐ My primary state of residence will be Arizona. Please send my temporary or permanent license immediately. (You must submit a permanent Arizona address and once you receive the ARIZONA license you **must** inactivate your other compact state license.)

Current declared Arizona home address: (You may fax this back to Arizona State Board of Nursing and send the original copy by mail.)

Name (please print): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Signature

Date

Please check our website address at www.azbn.gov for current compact states and policies.